

UNITED STATES DISTRICT COURT  
DISTRICT OF NEW JERSEY

Rodney J. Horne

(In the space above enter the full name(s) of the plaintiff(s).)

- against -

A & M Medical Services, LLC

**COMPLAINT**

Jury Trial:  Yes  No,  
CD

(check one)

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

**I. Parties in this complaint:**

- A. List your name, address and telephone number. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff	Name
	Street Address
	County, City
	State & Zip Code
	Telephone Number

Rodney J. Horne  
11 Ampere Plz Apt 35  
Essex, East Orange  
New Jersey, 07017  
862-215-9568

- B. List all defendants. You should state the full name of the defendants, even if that defendant is a government agency, an organization, a corporation, or an individual. Include the address where each defendant can be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1

Name A&M Medical Services, LLC  
 Street Address 3 Kinney Place  
 County, City Morris, Pompton Plains  
 State & Zip Code NJ 07444

Defendant No. 2

Name A&M Medical Services, LLC  
 Street Address 166 3rd Ave  
 County, City Passaic, Paterson  
 State & Zip Code NJ 07514

Defendant No. 3

Name \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 County, City \_\_\_\_\_  
 State & Zip Code \_\_\_\_\_

Defendant No. 4

Name \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 County, City \_\_\_\_\_  
 State & Zip Code \_\_\_\_\_

## II. Basis for Jurisdiction:

Federal courts are courts of limited jurisdiction. There are four types of cases that can be heard in federal court: 1) Federal Question - Under 28 U.S.C. § 1331, a case involving the United States Constitution or federal laws or treaties is a federal question case; 2) Diversity of Citizenship - Under 28 U.S.C. § 1332, a case in which a citizen of one state sues a citizen of another state and the amount in damages is more than \$75,000 is a diversity of citizenship case; 3) U.S. Government Plaintiff; and 4) U.S. Government Defendant.

- A. What is the basis for federal court jurisdiction? (check all that apply)

Federal Questions       Diversity of Citizenship  
 U.S. Government Plaintiff       U.S. Government Defendant

- B. If the basis for jurisdiction is Federal Question, what federal Constitutional, statutory or treaty right is at issue? Wrongful Termination

C. If the basis for jurisdiction is Diversity of Citizenship, what is the state of citizenship of each party?

Plaintiff(s) state(s) of citizenship \_\_\_\_\_

Defendant(s) state(s) of citizenship \_\_\_\_\_

**III. Statement of Claim:**

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. Where did the events giving rise to your claim(s) occur? \_\_\_\_\_

See Attached

B. What date and approximate time did the events giving rise to your claim(s) occur? \_\_\_\_\_

See Attached

C. Facts: \_\_\_\_\_

See Attached

What happened to you?

Who did what?

Was anyone else involved?

Who else saw what happened?

Rodney J. Horne

**III. Statement of Claim:**

**A. Where did the events giving rise to your claim(s) occur?**

I received a call on a Sunday January 29, 2017 (my day off) from the owner of A&M informing me that I was no longer on the work schedule and in-fact, I had been replaced by a new employee.

**B. What date and approximate time did the events giving rise to your claim(s) occur?**

Sunday, January 29, 2017 – early evening between 4-5pm

**C. Facts:**

**(What Happened to you?)**

On Sunday January 29, 2017 I received a phone call from the owner of A&M, Mel. He informed me that Richard Walker (A&M dispatcher) told him that I had refused to pick up a client on Friday January 27, 2017 and therefore he had taken me off of the schedule, and that I had been replaced with a new employee. My response was that no such event took place on that Friday and that I had not refused to pick anyone up. I asked if I was being fired, since he said that I was already replaced and if I needed to call unemployment on Monday and Mel's response was, "to do what I had to do."

The claim that I filed with unemployment was subsequently denied because someone at A&M had stated to them that I walked off the job. I am currently in the appeal process with unemployment. To date I have not received any compensation.

**(Who did what?)**

Mel the Owner of A&M wrongfully terminated me, saying that I refused a "pick up".

**(Was anyone else involved?)**

On Friday January 27<sup>th</sup>, at approximately 3:15 Richard Walker (A&M Dispatch) called me and asked me to pick-up a client for an approved drop off to their home. I asked him not to give me any additional runs that day because I was scheduled to get off at 3:30, and that I had a personal obligation after work that day. He sent me the information to pick up that client at 3:15, I dropped them off home as scheduled, and returned to the office and ended my day. There was no mention about any other clients; in fact there weren't any discussions about anything that had occurred that day. I didn't hear from anyone at A&M until I received the call from the owner on Sunday.

**(Who else saw what happened?)**

There was someone at my house on Sunday January 29, 2017 (Angela Rowe) that heard the phone conversation between Mel and me.

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**IV. Injuries:**

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received. \_\_\_\_\_

*NO Physical injuries*

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**V. Relief:**

State what you want the Court to do for you and the amount of monetary compensation, if any, you are seeking, and the basis for such compensation.

*See Attached*

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Rodney J. Horne

V. Relief:

I'm looking to recover:

1. Loss wages
2. The cost of back rent including late payments
3. Cost associated with a car I had to turn in (not being able to make the payments)
4. Cost associated with nonpayment of other monthly expenses:
  - a. Insurance (Medical & Life)
  - b. Utilities
  - c. Credit Card
5. Cost associated with caring for my child
6. Mental Anguish / Pain and Suffering
  - a. Worrying about my well being
  - b. Worrying about eviction for non-payment of rent / homelessness

**I declare under penalty of perjury that the foregoing is true and correct.**

Signed this 9<sup>th</sup> day of May, 20 17.

Signature of Plaintiff Rodney Home  
Mailing Address 11 Ampere Plz  
Apt 35  
East Orange, NJ 07017  
Telephone Number 862-215-9568  
Fax Number (if you have one) \_\_\_\_\_  
E-mail Address lois.rabia123@gmail.com

Note: All plaintiffs named in the caption of the complaint must date and sign the complaint.

Signature of Plaintiff: Rodney Home